									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003								10820707					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN					
TO	OTAL CLAIMS		22					RA	ΓE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		OR	BASIC FEE	770.00	
ΤC	TAL CHARGE	ABLE CLAIMS	Zminus 20=		•	7		xs 9= 18		18	OR	X\$18=	
INE	DEPENDENT C	LAIMS	6 minus 3 =		٠ م			X43=		129	OR	X86*	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT							,,,,,	OR	+290=	
* If the difference in column 1 is less than zero, enter *0* in column 2								TOT	AL	C 32	OR	TOTAL	_
12	CLAIMS AS AMENDED - PART II 12 - 20-04 (Column 1) (Column 2) (Column 3)								LLI	ENTITY	OR	OTHER	
AMENDMENTA	20.07	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER DUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 79	Minus	- 2	17	=\	П	X\$ 9	9=		OR	X\$18=	
Ž	Independent	. 6	Minus		b	• /		X43			OR	X86=	
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ı				1	+290»	
1,10,14,16,19,20								+145	TAL		OR	YOYAL	
) (')								ADDIT.			OR	ADDIT. FEE	
١,	2304 (Column 1) (Column 2) (Column 3)												
AMENDMENT B	` '	CLAIMS REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 31	Minus	- 2	12	.9	П	xs.	<u> </u>	એ નેડ	OR	X\$18=	100
ME	Independent	. 8	Minus		6	٠٨	П	x43	<u>o</u>	allo	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145		_ ,,,	OR	+290=	
7-18-05								YO STOCKE	YAL EE	435 <u>,</u>	₽R.	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										. r	χ.		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	T tal	· 23	Minus	~ 3	/		H	X\$ 9	-		OR	X\$18=	
	Ind pendent	.5	Minus	***	8	•	l	X43:	.		OR	X86=	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-+		٠.,		

FORM PTO-875 (Rev. 10/03)

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^{*} If the entry in column 1 is less than the entry in column 2, write 10' in column 3.

**If the "Righest Number Previously Paid For" in This SPACE is less than 30, enter "30.

TOTAL OP ADDIT.

*